

IDENTIFYING COVERAGE AND BARRIERS: WHICH METHODS ARE AVAILABLE?

Many methods are available to assess barriers and boosters to coverage. Depending on the information needed and resources available, actors can choose the most appropriate approach. Regardless of the method for collecting the data, a critical analysis of the programme and its performance should be carried out regularly.



COVERAGE MONITORING NETWORK

MEASURING COVERAGE & BARRIERS

Specific assessment methods have been developed to measure coverage and provide information on barriers to coverage:

	<u>SQEAC</u> The SQEAC method is a comprehensive, iterative tool to analyse the barriers and boosters to coverage and give an estimate of coverage. It is also provides succinct actions for improving access and coverage	<u>SLEAC</u> The SLEAC method is a method designed to give rapid information on the spatial representation of coverage. It was developed for measuring coverage at the <u>Regional level</u>	<u>Follow up SQEAC</u> If a coverage assessment has taken place, much of the necessary information is already available. Follow-up should be carried out in order to assess the impact of remedial activities
Outputs	<ul style="list-style-type: none"> ▪ Coverage estimate % ▪ Community profile ▪ Barrier information ▪ Action plan 	<ul style="list-style-type: none"> ▪ Coverage classification / estimate ▪ Barrier information 	<ul style="list-style-type: none"> ▪ Updated barrier information ▪ Coverage estimate %
Data sources	<ul style="list-style-type: none"> ▪ Routine programme data ▪ Community members ▪ Health facility staff ▪ Case finding 	<ul style="list-style-type: none"> ▪ Case finding 	<ul style="list-style-type: none"> ▪ Routine programme data ▪ Community members ▪ Health facility staff ▪ Case finding
Resources	\$\$\$ ⁱ	\$ District level) \$\$\$ Regional / National level	\$\$
Timing	21 days	5-7 days per district	7-10 days
Scale	Health District	Regional or National	Health District
Competencies	<ul style="list-style-type: none"> ▪ quantitative data monitoring and data analysis ▪ qualitative data collection / community assessment ▪ LOAS ▪ Bayes theory ▪ Geographic sampling ▪ Report writing and action plan setting 	<ul style="list-style-type: none"> ▪ LOAS ▪ Geographic sampling ▪ Report writing 	<ul style="list-style-type: none"> ▪ Qualitative data collection ▪ Geographic sampling ▪ Report writing

ASSESSING BARRIERS

Information on bottlenecks to coverage can be gained independently of coverage assessment methodologies, through routine data analysis or qualitative data collection. Bottlenecks can appear at various levels of service provision, ranging across 4 broad categories of enabling environment, supply, demand and quality. These categories are based on the Tanahashi model of coverage², which identifies the relationship between the target population and service achievement. Below are two methods for collecting this type of information.

	<p style="text-align: center;"><u>Routine Bottleneck Analysis</u> Collecting routine data as per the Tanahashi model of the determinants of coverage can help identify, in a structured and logical manner, bottlenecks to effective coverage. This analysis should be carried out on a regular basis using routine data and qualitative stakeholder discussion.</p>	<p style="text-align: center;"><u>Community Assessment</u> Qualitative information is key to understanding the profile of the community, to understanding health seeking behaviour, communication channels. This activity fits within a SQUEAC assessment but can be carried out independently if a coverage estimate is not needed.</p>
Outputs	<ul style="list-style-type: none"> ▪ Barrier Information ▪ Action Plan 	<ul style="list-style-type: none"> ▪ Community profile ▪ Barrier information ▪ Action plan
Data sources	<ul style="list-style-type: none"> ▪ Routine programme data 	<ul style="list-style-type: none"> ▪ Community members ▪ Health facility staff
Resources	\$	\$\$
Timing	Dependent on scale	5 days
Scale	Health District, Regional or National	Health District
Competencies	<ul style="list-style-type: none"> ▪ Quantitative data collection and analysis 	<ul style="list-style-type: none"> ▪ Qualitative data collection ▪ Report writing and Action plan setting

¹ Exact prices vary from country to country, however a SQUEAC should cost between \$5,000 to \$10,000 (without consultancy fees).

² For more information please visit <http://www.coverage-monitoring.org/about/what-is-coverage/>